4627-72-4317

IV

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Arthur Ray Huffman DATE 4-30-85 PERMIT NO. 795

PHONE: Business _____ Home _____

LOCATION 1100 TR 1178 TL 1444 TL 1444 TR Honeysuckle Lane 2nd lot on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 39 SECTION OR BLOCK NO. 9

House ( ) Mobile Home (X) Business ( ) Other addition of deck & extra bedroom

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	
Auto. Dishwasher	Yes (X)	No ( )	
Auto. Wash. Machine	Yes (X)	No ( )	
Site Suitable	Yes (X)	No ( )	

Lot Area .67 acres

Character & Porosity of Soil _____

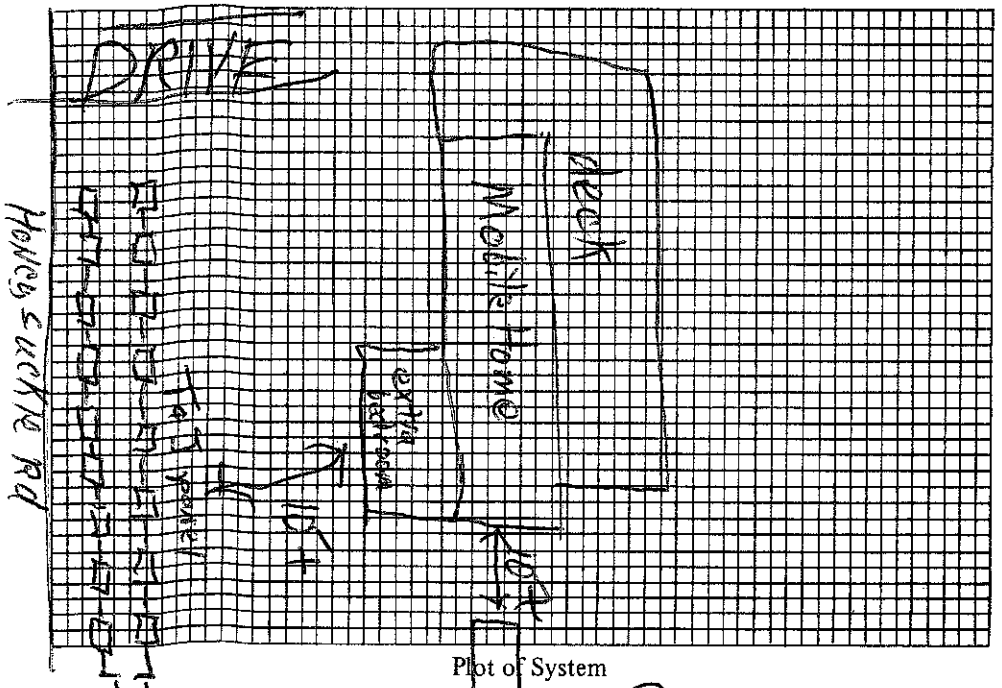
Percolation Rate _____

Topography EXISTING

Depth to Water Table _____

Rock or other impervious formations SYSTEM

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 150 LFt

Sq. Ft. _____ Linear Ft. 2 T&J Parts

Depth of Stone in Lines _____

Water Supply: Individual (X)

Public ( )

Installed by F. J. Ervin 9-2-80

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY R. W. Johnson & Fred Clemmer

COMMENTS: Existing system working OK at date of inspection, adding deck and another bedroom don't need to add more line because has one bedroom and is only adding another; system is OK 3 bedrooms

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Charles K. Barnett DATE 4-30-85

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold